## APPLICATION FOR REFUND OF RELCATION SECURITY DEPOSIT (Damages Enroute)

FC	OR OFFICE USE
From TMK: To TMK: Bldg. I.D. No.: Permit No.:	

Building moved From:	
A	ddress District
To:	ddress District
Description of Building:	
Moving Contractor:	
Depositor:	Telephone No:
Address:	
Depositor's Signature:	Date:
I	BUIDING DIVISION
Building was relocated properly. Estimated date but	uilding moved:
	Building Inspector Date
CLEA	RANCES OF AGENCIES
POLICE DEPARTMENT	DEPT. OF TRANSPORATION SERVICES
<ul> <li>No report of damages.</li> <li>Damage reported. Please withhold deposit until claim has been satisfied.</li> <li>No record of Police Escort.</li> </ul>	<ul> <li>□ No report of damages.</li> <li>□ Damage reported. Please withhold deposit until claim has been satisfied.</li> <li>□ No Traffic Permit issued.</li> </ul>
for Police Department D	ate for Dept. of Transportation Services Date
	MEMORANDUM
To: Construction and Maintenance Fiscal Sect From: Department of Planning and Permitting	ion
The amount deposited as security to cover any danow be returned to the payee named herein:	mages less any claims for damages due to this building relocation, may
Account of:	
Claimants:	\$
	\$Total Claims \$
	Total to be Refunded \$
Authorized by: for Director of Dept. of Planni	ing and Permitting Date
TOI Director of Dept. of Planin	and i dimitting